

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)

09/534 024  
APPLICANT'S

13-30-00

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL NO.	12		12			
TOTAL DEP.	42		42			
PTOL.	54		54			

	IND.		DEP.		IND.		DEP.		IND.		DEP.	
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